

JANET T. MILLS GOVERNOR

## STATE OF MAINE DEPARTMENT OF PUBLIC SAFETY MAINE EMERGENCY MEDICAL SERVICES 152 STATE HOUSE STATION AUGUSTA, MAINE



MICHAEL SAUSCHUCK COMMISSIONER

> J. SAM HURLEY DIRECTOR

TRAUMA ADVISORY
WORK GROUP
January 24, 2022
Meeting conducted via Zoom
MINUTES

**Members Present:** Rick Petrie (Chair), Sam Hurley (MEMS), Thomas Judge (LFOM), Dr. Matthew Sholl (MEMS), Tammy Lachance (CMMC), Pret Bjorn (NL-EMMC), Dr. Julie Ontengco (MMC), Dr. Richard King (CMMC), Dr. Joe Rappold (MMC), Lyndsy Gardner (Maine General)

Guests: Dr. Norm Dinerman, Dr. Seth Ritter, Dr. Mark Grant, Dr. Bryan Morse, Paul Marcolini, Jason Cooney, Keith Friedrich

Staff Present: Dr. Kate Zimmerman (Trauma Systems Manager), Marc Minkler

**NOTE**: Although not part of the meeting, we have added information that may be helpful to the reader as there are a variety of abbreviations used in these minutes that may be unfamiliar – these abbreviations include: RTC – Regional Trauma Center, currently defined at Maine Medical Center, Northern Light-Eastern Maine Medical Center and Central Maine Medical Center

TSH – Trauma System Hospital – All hospitals in Maine with a 24/7 Emergency Department, that are not a RTC and support the transfer of patients needed trauma services

*RTTD Course* – The Rural Trauma Team Development Course as developed by the ACS (https://www.facs.org/quality-programs/trauma/education/rttdc)

*IFT* – Interfacility Transport, typically from a smaller hospital to a larger hospital for more advanced care *MEMS* – Maine EMS

ACS – American College of Surgeons, which verifies trauma centers at various levels, with level 1 being the most comprehensive. Currently Maine Medical Center is a Level 1, while Northern Light-Eastern Maine Medical Center and Central Maine Medical Center are both Level 2.

LFOM - LifeFlight of Maine

The current Maine EMS Trauma System Operations Manual (Trauma Plan) can be found on the Maine EMS website under the Trauma Advisory Committee Resources page: <a href="https://www.maine.gov/ems/boards-committees/trauma-advisory/resources">https://www.maine.gov/ems/boards-committees/trauma-advisory/resources</a>

This workgroup was conducted virtually on Zoom. Workgroup called to order by Mr. Petrie at 11:04 am

This workgroup met to discuss the efforts around drafting a document of "Maine EMS Trauma Transfer Guidance" based on the changing scope of trauma centers in the State of Maine.

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Dr. Sholl & Dr. Dinerman present on why transfer of unstable trauma patients need to be transferred to a Level 1 or 2 trauma center based upon the Rural Trauma Team Development (RTTD) Course and ACS-COT principles. They acknowledge there may be specialized centers (microsurgery, burns) that may benefit a patient, but overall consideration is for Level 1 and 2. They acknowledge a need and importance of Level 3 trauma centers but with consideration of the avoidance of secondary transfers balanced with time, distance, and patient stability.

Wordsmithing and discussion ensued on various aspects of the document.

Discussion on concepts of trauma patients being transported to Level 1/Level 2 if it bypasses a Level 3, or other surgical capable hospital, specifically in the hemodynamically unstable patient.

- Is there value for a regional trauma center for very specific needs?
- Considerations of access to general surgeons
- Consideration of access to blood and blood products in non-trauma center hospitals
- Consideration of preparing for future option of other ACS Levels and hospitals that seek ACS verification
- Consideration of language of ACS and those immersed in it vs. those who need a reference in emergent scenarios
- Maine EMS has used the verification process of ACS to designate trauma centers and is addressed in current trauma plan

Motion to approve "Maine EMS Trauma Transfer Guidance" letter, as edited, to present to full TAC Committee on January 25, 2022. Motion carries: 8 Yes, 1 No (Ontengco), 0 abstentions, 1 no response (Hurley).

Discussion on listing hospitals by name and ACS Level within letter, including Level 4, within document as local trauma centers. Recommendation is that it is beyond the scope of this subcommittee and bring forward at full TAC meeting.

Workgroup ended at 12:12 pm

Next Full TAC Meeting – January 25, 2022 at 12:30 Minutes submitted by Mr. Minkler Minutes approved on April 26, 2022

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